Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Anita First name Marie Middle name Braeutigan	First name Middle name	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	ve		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7241		

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	E	EINs			
5.	Where you live	5778 A St. Springfield, OR 97478	ı	f Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	1	Number, Street, City, State & ZIP Code			
		Lane County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	1	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	(Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	ĺ	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Anita Marie Braeu	ıtigan			Case n	number (if known)		
Part 2: Tell the Court About	Your Bankruptcy C	ase					
7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy re (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
choosing to the under	Chapter 7						
	☐ Chapter 11						
	☐ Chapter 12						
	☐ Chapter 13						
8. How you will pay the fee	about how y	ou may pay. Typically, if your attorney is submitting you	ou are paying	the fee yourself,	you may pay with cash	r local court for more details n, cashier's check, or money n a credit card or check with	
		y the fee in installments. ee in Installments (Official		this option, sign	and attach the Applica	ation for Individuals to Pay	
	☐ I request the but is not red	at my fee be waived (You quired to, waive your fee, a	may request and may do so	only if your incor	me is less than 150% of	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out	
	the <i>Applicati</i>	on to Have the Chapter 7 i	Filing Fee Wa	ived (Official Forr	m 103B) and file it with	your petition.	
9. Have you filed for bankruptcy within the	□ No.						
last 8 years?	■ Yes.	5	\//b o p	0/04/40	Coop number	40.00040.040	
	District	Eugene, Oregon	When	9/21/18	Case number	18-62910-tmr13	
	District District		When When		Case number Case number		
	District		vviieii		Case number		
10. Are any bankruptcy cases pending or being	■ No						
filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
	Debtor				Relationship to y	ou	
	District		When		Case number, if		
	Debtor				Relationship to y		
	District		When		Case number, if	known	
11. Do you rent your residence?	□ No. Go to	line 12.					
residence :	■ Yes. Has ye	our landlord obtained an e	viction judgme	ent against you?			
		No. Go to line 12.					
		Yes. Fill out <i>Initial Staten</i> bankruptcy petition.	nent About an	Eviction Judgme	ent Against You (Form	101A) and file it with this	

Deb	otor 1 Anita Marie Braeu	tigan			Case number (if known)		
Don	1 2 Domont About Any Du	-!	V 0	aa a Cala Buannia			
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	☐ Yes. Name and location of business				
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code		
	it to this petition.		Check	the appropriate bo	x to describe your business:		
	·				ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
-	For a definition of <i>small</i>	■ No.	I am n	ot filing under Char	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or An	y Property That Needs Immediate Attention		
14	Do you own or have any				, , ,		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is t	he hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	the property?			
					Number, Street, City, State & Zip Code		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Anita Marie Braeu	tigan		Case number	er (if known)		
Par	6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	individual primarily for a pers		ined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.					
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	we that are not consumer debts or busine	ss debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. I are paid that funds will be av	Do you estimate that after any exempt propagallable to distribute to unsecured creditors	perty is excluded and administrative expenses ?		
	administrative expenses		■ No	primarily for a personal, family, or household purpose." to to line 16b. So to line 17. debts primarily business debts? Business debts are debts that you incurred to obtain ra business or investment or through the operation of the business or investment. to to line 16c. So to line 17. type of debts you owe that are not consumer debts or business debts			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		perty is excluded and administrative expenses s? 25,001-50,000		
18.	How many Creditors do	1 -49		☐ 1,000-5,000	☐ 25,001-50,000		
	you estimate that you owe?	☐ 50-99					
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to		50,000				
	be worth?		01 - \$100,000				
			001 - \$500,000 001 - \$1 million				
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000				
		_	001 - \$500,000 001 - \$1 million	_ **********	_ ' ' ' ' ' ' ' '		
Par	7: Sign Below						
For	you	I have ex	amined this petition, and I dec	clare under penalty of perjury that the infor	mation provided is true and correct.		
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out to document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					ot an attorney to help me fill out this		
		I request	relief in accordance with the o	chapter of title 11, United States Code, spe	ecified in this petition.		
		bankrupto and 3571	cy case can result in fines up				
		Anita M	a Marie Braeutigan arie Braeutigan e of Debtor 1	Signature of Debto	or 2		
		Executed	on October 16, 2019	Executed on			
			MM / DD / YYYY	MN	I / DD / YYYY		

Debtor 1	Anita Marie Braeutigan	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joyce Sobel	Date	October 16, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Joyce Sobel			
Printed name			
Joyce Sobel, Attorney at Law			
Firm name			
451 West Broadway #17			
Eugene, OR 97401			
Number, Street, City, State & ZIP Code			
Contact phone 541-344-8085	Email address	jsluckey@aol.com	
92467 OR			
Bar number & State			

United States Bankruptcy CourtDistrict of Oregon

In re	Anita Marie Braeutigan		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTORM	NEY FOR D	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy, or	agreed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,000.00
	Prior to the filing of this statement I have received			1,000.00
	Balance Due			0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person un	less they are men	nbers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects of	of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on home 	tement of affairs and plan which mors and confirmation hearing, and reduce to market value; exempns as needed; preparation a	ay be required; any adjourned he	arings thereof;
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di any other adversary proceeding.			ces, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of ar cankruptcy proceeding.	y agreement or arrangement for pa	ayment to me for	representation of the debtor(s) in
(October 16, 2019	/s/ Joyce Sobel		
1	Pate Pate	Joyce Sobel		
		Signature of Attorney Joyce Sobel, Attorn	nev at Law	
		451 West Broadway		
		Eugene, OR 97401 541-344-8085		
		jsluckey@aol.com		
		Name of law firm		

UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

	DISTRICT C	F OREGON		
In re Anita Marie Braeutigan) Case N)) CHAP	TER 7 INDIVIDUAL	(If Know	vn)
Debtor(s)		EMENT OF INTENTI I U.S.C. §521(a)	ON(S)	
· /) IERI	0.5.C. §521(a)		
MPORTANT NOTICES TO DEBTOR(S): .Complete, sign and file this form even if you have reditors are listed, make sure the certificate of services.		operty of the estate or	personal property subject t	o unexpired leases. If
. Failure to perform the intentions as to property state	ted below within 30 da	ys after the first date s	et for the Meeting of Credi	itors
nder 11 USC §341(a) may result in relief for the cre	ditor from the Automa	tic Stay protecting suc	h property.	
PART A - Debts secured by property of the estate. (dditional pages is necessary.)	Part A must be fully c	ompleted for each deb	t which is secured by propo	erty of the estate. Attach
☐ IF NONE - Check this box.				
Property No. 1				
Creditor's Name: Progressive Leasing			ty Securing Debt: of household furniture ner debt.	including a bed and
Property will be (check one): ☐ SURRENDERED	■ RETAINED			
If retaining the property, I intend to (check at least o Redeem the property Reaffirm the debt Other. Explain (for example, avoid lien using 11 Property is (check one): ■ CLAIMED AS EXEMI	USC §522(f)	MED AS EVEMBT		
PART B - Personal property subject to unexpired leadinges if necessary.)			npleted for each unexpired	l lease. Attach additional
☐ IF NONE - Check this box.	-			
Property No. 1				
Lessor's Name: Progressive Leasing	Describe Leased Pr Lease for househ		USC §365(p)(2)	umed pursuant to 11
			■ YI	ES 🗆 NO
Continuation sheets attached (if any). I DECLARE UNDER PENALTY OF PERJURY THAT INDICATES INTENTION AS TO ANY PROPERTY (SECURING A DEBT AND/OR PERSONAL PROPER AN UNEXPIRED LEASE. DATE: October 16, 2019	OF MY ESTATE			
/s/ Anita Marie Braeutigan		/s/ Joyce Sobel		92467 OR
DEBTOR'S SIGNATURE		DEBTOR OR ATTO	DRNEY'S SIGNATURE	OSB# (if attorney)
JOINT DEBTOR'S SIGNATURE (If applicable)		JOINT DEBTOR'S	SIGNATURE (If applicable at	nd no attorney)
			541-344-8085 IGNER'S NAME & PHONE I	NO.
		451 West Broad Eugene, OR 974	lway #17	
		SIGNER'S ADDRES	SS (if attorney)	

521.05 (12/1/16) **Page 1**

NON-JUDICIAL REMEDY WHEN CONSUMER DEBTOR FAILS TO TIMELY PERFORM STATED INTENTIONS

Creditors, see <u>Local Form #715</u> [attached if this document was served on paper] if you wish information on how to obtain non-judicial relief from the automatic stay of 11 U.S.C. §362(a) as to your collateral.

OUESTIONS????

Call an attorney with questions about these procedures or the law. However, only call the debtor's attorney if you have questions about the debtor's intent as to your collateral.

=:11	in this inform	ation to identify your	00001			
	otor 1	ation to identify your Anita Marie Brae				
Den	noi i	First Name	Middle Name	Last Name		
1 -	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ban	kruptcy Court for the:	DISTRICT OF OREGON	N		
Cas	e number					
(if kno					_	cif this is an ded filing
		<u>m 106Sum</u>				
				d Certain Statistical Information		12/15
infor	mation. Fill o	ut all of your schedul	es first; then complete th	are filing together, both are equally responsible to information on this form. If you are filing amend the box at the top of this page.		
Part	11: Summa	rize Your Assets				
					Your a Value o	ssets of what you own
1.		B: Property (Official F			\$	0.00
					· 	
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	6,487.41
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	6,487.41
Part	Summa	rize Your Liabilities				
						abilities t you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	240.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	l Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	50,537.82
				Your total liabilities	\$	50,777.82
Part	t 3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo		<i>I</i>	\$	2,712.07
5.		Your Expenses (Officia onthly expenses from li			\$	2,669.66
Part	4: Answer	These Questions for	Administrative and Stati	stical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with y	our other scl	nedules.
7.	■ Yes What kind of	f debt do you have?				
				debts are those "incurred by an individual primarily fog for statistical purposes. 28 U.S.C. § 159.	r a personal,	family, or
		ebts are not primarily t with your other sched		ve nothing to report on this part of the form. Check th	<i>is box</i> and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,815.45

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	25,053.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,053.00

Fill in th	is info	ormation to identify your c	ease and this filing:			
	15 11110					
Debtor 1		Anita Marie Braeu	Middle Name	Last Name		
Debtor 2						
(Spouse, if t		First Name	Middle Name	Last Name		
United S	tates I	Bankruptcy Court for the:	DISTRICT OF OREGON			
Case nui	mber					☐ Check if this is an
						amended filing
Officia	al F	orm 106A/B				
Sche	edu	le A/B: Prope	ertv			12/15
				e. If an asset fits in more than or	ne category, list the asset	
	n. If m	ore space is needed, attach a		people are filing together, both ar On the top of any additional page		
Part 1:	Describ	pe Each Residence, Building,	Land, or Other Real Estate Yo	ou Own or Have an Interest In		
4. De veu		r have any large an amplitable	interest in any residence but	Idina land as aimiles assessed.		
1. Do you	own o	r nave any legal or equitable	interest in any residence, but	lding, land, or similar property?		
No. 0	Go to F	Part 2.				
☐ Yes.	Wher	e is the property?				
Part 2:	Describ	pe Your Vehicles				
□ No ■ Yes		trucks, tractors, sport util	,			
3.1 Ma	ake:	Dodge	Who has an interest	t in the property? Check one		claims or exemptions. Put ired claims on Schedule D:
М	odel:	Durango	Debtor 1 only			laims Secured by Property.
	ear:	2004	Debtor 2 only		Current value of the	Current value of the
	-	nate mileage: 296,0 ormation:		otor 2 only e debtors and another	entire property?	portion you own?
		on: 5778 A St., Springfi		e debiois and another		
	R 974		Check if this is c	ommunity property	\$2,954.00	\$2,954.00
			(300 manuchoma)			
				vehicles, other vehicles, and		
Ехапір	iles. Di	oats, trailers, motors, persor	nai waterciait, lishing vesse	els, snowmobiles, motorcycle ad	cessones	
■ No						
☐ Yes						
5 Add +	he do	llar value of the portion w	ou own for all of your entr	ies from Part 2, including any	, entries for	
						\$2,954.00
		be Your Personal and Housel		allowing itams?		Current value of the
טט you נ	OWII 0	r have any legal or equital	DIE IIILEIESLIII AIIY OI TIIE I	onowing items :		portion you own?
						Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	Anita Marie I	Braeutigan Case number	(if known)
6.		old goods and fo es: Major applian	urnishings ces, furniture, linens, china, kitchenware	
		Describe		
			Various household goods and furnishings including beds, sofa,	1
			kitchen table.	
			Location: 5778 A St., Springfield OR 97478	\$800.00
7.	□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanner phones, cameras, media players, games	s; music collections; electronic devices
			Various household electronics including a flat screen, a dvd player	1
			and a laptop. Location: 5778 A St., Springfield OR 97478	\$250.00
_			Location: 3770 A Ot., Opinigheid Oit 37470	
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; st ons, memorabilia, collectibles	amp, coin, or baseball card collections;
	□ res.	Describe		
9.	Example	ent for sports ar es: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	s; canoes and kayaks; carpentry tools;
	■ No	Describe		
	□ 163.	Describe		
10.	. Firearm Examp		s, shotguns, ammunition, and related equipment	
	■ No	,		
	☐ Yes.	Describe		
11.	□ No ·		othes, furs, leather coats, designer wear, shoes, accessories	
				٦
			Women's apparel and accessories; shoes. Location: 5778 A St., Springfield OR 97478	\$150.00
12.	. Jewelry Examp ■ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watche	s, gems, gold, silver
	☐ Yes.	Describe		
13		rm animals oles: Dogs, cats, I	pirds, horses	
	Yes.	Describe		
			1 dog.	7
			Location: 5778 A St., Springfield OR 97478	\$250.00
_				
14.	. Any oth	her personal and	d household items you did not already list, including any health aids you did	not list

■ No

☐ Yes. Give specific information.....

Official Form 106A/B

Schedule A/B: Property page 2

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De	ebtor 1 Anita Marie Braeutigan	Case number (if known)	
15	5. Add the dollar value of all of your entries from Pa for Part 3. Write that number here	rt 3, including any entries for pages you have attached	\$1,450.00
Pa	rt 4: Describe Your Financial Assets		
	o you own or have any legal or equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your wallet, in your hon □ No ■ Yes	ne, in a safe deposit box, and on hand when you file your petitio	n
		Cash in debtor's wallet.	\$40.00
17.	Deposits of money Examples: Checking, savings, or other financial accounts with institutions. If you have multiple accounts with No. ■	unts; certificates of deposit; shares in credit unions, brokerage h with the same institution, list each.	ouses, and other similar
	■ Yes	Institution name:	
	17.1. Checking	Chase bank - Springfield, Oregon, Thurston branch.	\$2.54
18.	Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brok No Yes		
19.	Non-publicly traded stock and interests in incorpor joint venture No	rated and unincorporated businesses, including an interest	in an LLC, partnership, and
	☐ Yes. Give specific information about them	 % of ownership:	
20.	Government and corporate bonds and other negotion Negotiable instruments include personal checks, cash Non-negotiable instruments are those you cannot tran	niers' checks, promissory notes, and money orders.	
	☐ Yes. Give specific information about them Issuer name:		
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 40 □ No	3(b), thrift savings accounts, or other pension or profit-sharing p	olans
	■ Yes. List each account separately. Type of account:	Institution name:	
	401(k)	Retirement account through Debtor's employer Avalon.	\$450.93
	■ No	ublic utilities (electric, gas, water), telecommunications compani	ies, or others
	☐ Yes	Institution name or individual:	

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Anita Mar	ie Braeutigan		Case number (if ki	nown)
23.	Annuit	ies (A contrac	et for a periodic payment of mone	y to you, either for life o	for a number of years)	
	■ No □ Yes		Issuer name and description.			
	26 U.S.		ation IRA, in an account in a qu I), 529A(b), and 529(b)(1).	ualified ABLE program	, or under a qualified state tuitio	on program.
	■ No □ Yes		Institution name and description	. Separately file the rec	ords of any interests.11 U.S.C. § 5	221(c):
	`	equitable or	future interests in property (or	ther than anything liste	ed in line 1), and rights or powe	rs exercisable for your benefit
	■ No □ Yes.	Give specific	information about them			
	Examp		, trademarks, trade secrets, and domain names, websites, proceed			
	■ No □ Yes.	Give specific	information about them			
			s, and other general intangible permits, exclusive licenses, coop		ngs, liquor licenses, professional	licenses
		Give specific	information about them			
Mo	oney or	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
		unds owed t	o you			
	■ No □ Yes.	Give specific	information about them, including	y whether you already fil	ed the returns and the tax years	
	Examp ■ No		or lump sum alimony, spousal su	upport, child support, ma	nintenance, divorce settlement, pro	operty settlement
		oles: Unpaid w	neone owes you rages, disability insurance payme unpaid loans you made to some		rick pay, vacation pay, workers' c	ompensation, Social Security
		Give specific	information			
			Unpaid ear	ned wages of Debto		\$1,589.94
		ts in insuran bles: Health, d		savings account (HSA);	credit, homeowner's, or renter's in	nsurance
		Name the ins	urance company of each policy a Company name:	nd list its value.	Beneficiary:	Surrender or refund value:
	If you a		perty that is due you from some ciary of a living trust, expect proc		ce policy, or are currently entitled	to receive property because
	■ No □ Yes.	Give specific	information			
			d parties, whether or not you has, employment disputes, insurance			
Offi	icial Forn	n 106A/B		Schedule A/B: Proper	y	page 4

Best Case Bankruptcy

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Deb	tor 1	Anita Marie Braeutigan		Case number (if known)	
] Yes.	Describe each claim			
	Other	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to set off o	alaims
	Yes.	Describe each claim			
	No	nancial assets you did not already list Give specific information			
	Add	the dollar value of all of your entries from Part 4, including art 4. Write that number here			\$2,083.41
Part	5: De	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
	No. Go	own or have any legal or equitable interest in any business-relate o to Part 6. Go to line 38.	d property?		
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
	No.	a own or have any legal or equitable interest in any farm- Go to Part 7. Go to line 47.	or commercial fishir	ng-related property?	
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
_		have other property of any kind you did not already list? coles: Season tickets, country club membership	,		
	Yes.	Give specific information			
54.	Add	the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part '	1: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$2,954.00		
57.	Part :	3: Total personal and household items, line 15	\$1,450.00		
58.		4: Total financial assets, line 36	\$2,083.41		
59.		5: Total business-related property, line 45	\$0.00		
60.		6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part :	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$6,487.41	Copy personal property total	\$6,487.41
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$6,487.41

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	Anita Marie Brae	utigan		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON	N	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	vrm 106C			
Official I C	<u> </u>			
	C. The Dr	anarty Vall C	Claim as Exempt	4/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Identify the Property You Claim as E	xempt							
Which set of exemptions are you claiming								
Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.								
☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
■ You are claiming federal exemptions. 11 l	U.S.C. § 522(b)(2)							
For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
	Copy the value from Check only one box for each exemption. Schedule A/B							
2004 Dodge Durango 296,000 miles	\$2,954.00		\$2,954.00	11 U.S.C. § 522(d)(2)				
97478 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
Various household goods and	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)				
kitchen table. Location: 5778 A St., Springfield OR 97478			100% of fair market value, up to any applicable statutory limit					
Line from Schedule A/B: 6.1								
Various household electronics	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)				
and a laptop. Location: 5778 A St., Springfield OR 97478 Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit					
Women's apparel and accessories;	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)				
Location: 5778 A St., Springfield OR 97478			100% of fair market value, up to any applicable statutory limit					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	For any property you list on Schedule A/B Brief description of the property and line on Schedule A/B that lists this property 2004 Dodge Durango 296,000 miles Location: 5778 A St., Springfield OR 97478 Line from Schedule A/B: 3.1 Various household goods and furnishings including beds, sofa, kitchen table. Location: 5778 A St., Springfield OR 97478 Line from Schedule A/B: 6.1 Various household electronics including a flat screen, a dvd player and a laptop. Location: 5778 A St., Springfield OR 97478 Line from Schedule A/B: 7.1 Women's apparel and accessories; shoes. Location: 5778 A St., Springfield OR	Current value of the protein you own Copy the value from Schedule A/B that lists this property 2004 Dodge Durango 296,000 miles Location: 5778 A St., Springfield OR 27478 Line from Schedule A/B: 3.1 Various household goods and furnishings including beds, sofa, kitchen table. Location: 5778 A St., Springfield OR 27478 Line from Schedule A/B: 6.1 Various household electronics including a flat screen, a dvd player and a laptop. Location: 5778 A St., Springfield OR 27478 Line from Schedule A/B: 7.1 Women's apparel and accessories; shoes. Location: 5778 A St., Springfield OR 27478 Line from Schedule A/B: 7.1	For any property you list on Schedule A/B that you claim as exempt, Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B Copy the value of the portion you own Copy the value from Schedule A/B Copy the value fro	For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Grief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B Copy the value of the profession of the profession of the portion you own Copy the value of the profession of the profession of the portion of the profession of the profession of the portion of the profession of the portion of the profession of the profession of the profession of the portion of the profession of the portion of the profession of the professi				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

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De	ebtor 1 Anita Marie Braeutigan			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	1 dog. Location: 5778 A St., Springfield OR	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
	97478 Line from <i>Schedule A/B</i> : 13.1			100% of fair market value, up to any applicable statutory limit	
	Cash in debtor's wallet. Line from Schedule A/B: 16.1	\$40.00		\$40.00	11 U.S.C. § 522(d)(5)
	Line from Schedule AVD. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase bank - Springfield, Oregon, Thurston branch.	\$2.54		\$2.54	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	401(k): Retirement account through Debtor's employer Avalon.	\$450.93		\$450.93	11 U.S.C. § 522(d)(12)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Unpaid earned wages of Debtor. Line from Schedule A/B: 30.1	\$1,589.94		\$1,192.45	15 U.S.C. § 1673
	Elife from Genedale AVD. Go. 1			100% of fair market value, up to any applicable statutory limit	
	Unpaid earned wages of Debtor. Line from Schedule A/B: 30.1	\$1,589.94		\$397.49	11 U.S.C. § 522(d)(5)
	Line from Schedule AVD. 30.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	nt.)
	■ No				
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	Π Yes				

Fill in this information to identify	your case:			
Debtor 1 Anita Marie First Name				
Debtor 2	Middle Name Last Name			
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court fo	the: DISTRICT OF OREGON			
Case number				
(if known)			☐ Check	if this is an
			amend	ded filing
Official Form 106D				
	ore Who Hove Claims Secur	ad by Draparty		40/45
Schedule D: Crediti	ors Who Have Claims Secur	ed by Property	<u>y</u>	12/15
	ible. If two married people are filing together, both are iill it out, number the entries, and attach it to this form			
1. Do any creditors have claims secur	ed by your property?			
☐ No. Check this box and sub	mit this form to the court with your other schedules	s. You have nothing else to	report on this form.	
Yes. Fill in all of the information	tion below.			
Part 1: List All Secured Claim	s			
	has more than one secured claim, list the creditor separa	Column A	Column B	Column C
for each claim. If more than one creditor	rhas a particular claim, list the other creditors in Part 2. / abetical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Progressive Leasing	Describe the property that secures the claim:	\$240.00	\$600.00	\$0.00
Creditor's Name 256 W. Data Dr. Draper, UT 84020	For: Leasing of household furniture including a bed and a sofa; consumer debt. As of the date you file, the claim is: Check all that apply.			
	Contingent			
Number, Street, City, State & Zip Code	■ Unliquidated □ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage of	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and anot				
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 4/17/18	Last 4 digits of account number 724	11		
		***	0.00	
-	in Column A on this page. Write that number here: add the dollar value totals from all pages.		0.00 0.00	
Part 2: List Others to Be Notific	ed for a Debt That You Already Listed			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in t	this information to identify your o	case:			
Debtor					
DCDIO	First Name	Middle Name	Last Name		
Debtor					
(Spouse i	if, filing) First Name	Middle Name	Last Name	_	
United	States Bankruptcy Court for the:	DISTRICT OF OREGON			
Case n	numher				
(if known)					Check if this is an
					amended filing
Offici	ial Form 106E/F				
	edule E/F: Creditors W	ho Have Unsecu	red Claims		12/15
				Part 2 for creditors with NONPRIORITY	claims. List the other party to
	nd case number (if known).	•	to report in a Part, o	do not file that Part. On the top of any a	dditional pages, write your
1. Do	any creditors have priority unsecured	d claims against you?			
	No. Go to Part 2.				
	Yes.				
Part 2:	List All of Your NONPRIORIT	V Uncopured Claims			
	any creditors have nonpriority unsec				
_	No. You have nothing to report in this pa		rt with vour other sche	edules.	
_	Yes.				
uns	secured claim, list the creditor separately n one creditor holds a particular claim, li	for each claim. For each claim	listed, identify what t	p holds each claim. If a creditor has more ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	y included in Part 1. If more
ı aı					Total claim
4.1	ACE Cash Express	Last 4 digits	of account number	7241	
	Nonpriority Creditor's Name				\$300.00
	1231 Greenway Drive, Suite	600 When was the	e debt incurred?	9/5/19	\$300.00
	1231 Greenway Drive, Suite Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one.			9/5/19 s: Check all that apply	\$300.00
	Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one.		e you file, the claim i		\$300.00
	Irving, TX 75038 Number Street City State Zip Code	As of the date	e you file, the claim i		\$300.00
	Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	As of the date	e you file, the claim i		\$300.00
	Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	As of the date ☐ Contingent ☐ Unliquidate ☐ Disputed	e you file, the claim i	s: Check all that apply	\$300.00
	Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a comm	As of the date Contingent Unliquidate Disputed Type of NONF nunity	e you file, the claim is ed PRIORITY unsecured	s: Check all that apply	
	Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a commodebt	As of the date Contingent Unliquidate Disputed Type of NONF nunity Obligations	e you file, the claim is ed PRIORITY unsecured ans s arising out of a sepa	s: Check all that apply	
	Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a comm	As of the date Contingent Unliquidate Disputed Type of NONE nunity Obligations report as priori	e you file, the claim is ed PRIORITY unsecured ans s arising out of a sepa	s: Check all that apply	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

Atlan Financial Co. 1	Land A. Parka and	5054	A444
Atlas Financial Services Nonpriority Creditor's Name	Last 4 digits of account number		\$144.87
P.O. Box 1180 Vancouver, WA 98666-1180	When was the debt incurred?	3/19/18	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify debt.	peutic Associates; consumer	
Capital One Bank USA, NA	Last 4 digits of account number	6404	\$393.00
Nonpriority Creditor's Name P.O. Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	1/16/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify For: Credit	t card; consumer debt.	
Credit Bureau Systems, Inc.	Last 4 digits of account number	7241	\$231.00
Nonpriority Creditor's Name 100 Fulton Ct. Padusob KY 12001	When was the debt incurred?	2018	
Paducah, KY 42001 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and an and atheres 200 and 100	
■ No	Debts to pension or profit-sharin		
□ Yes	■ Other. Specify For: Accou	unt; consumer debt.	

Schedule E/F: Creditors Who Have Unsecured Claims

Delivery Financial Services	Last 4 digits of account number	1567	\$1,000.0
Nonpriority Creditor's Name	_		V 1,00010
3710 W Greenway Rd. Ste. 131 Phoenix, AZ 85053	When was the debt incurred?	5/1/18	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	Пол		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	L. L. C.	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No No	Debts to pension or profit-sharin	• •	
Yes	Other. Specify For: Accou	ınt; consumer debt.	
Diversified Consultants, Inc.	Last 4 digits of account number	7241	\$465.00
Nonpriority Creditor's Name P.O. Box 551268	When was the debt incurred?	2018	
Jacksonville, FL 32255-1268 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim i	s. Спеск ан тат арргу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	■ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other Specify For: Accou	ınt; consumer debt.	
5 1 1 D 0 - /5D0			
Enhanced Recovery Co./ERC Collections	Last 4 digits of account number	7241	\$1,374.00
Nonpriority Creditor's Name P.O. Box 57457	When was the debt incurred?	2018	
Jacksonville, FL 32241 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a plane, and other similar debte	
No No	Debts to pension or profit-sharin		
Yes	■ Other. Specify For: Two a	ccounts; consumer debt.	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 8

Firet Lean	Look Aulinita of control of the	7044	A400 0
First Loan Nonpriority Creditor's Name	Last 4 digits of account number		\$400.0
P.O. Box 1536	When was the debt incurred?	9/01/19	
Lower Lake, CA 95457			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
_	■ Unliquidated		
Debtor 2 only	_ '		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans	a Graini.	
☐ Check if this claim is for a community	_	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify For: Perso	nal loan; consumer debt.	
Fox Hills Cash	Last 4 digits of account number	7241	\$700.0
Ionpriority Creditor's Name	_		Ψ. σσ.
P.O. Box 196	When was the debt incurred?	2019	
Batesland, SD 57716 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	710 of the date you me, the claim	or check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	-	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify For: Perso	nal loan; consumer debt.	
C Systems Collections	Lord Police Control	7241	\$174.0
Nonpriority Creditor's Name	Last 4 digits of account number		φ174.
P.O. Box 64378	When was the debt incurred?	2018	
Saint Paul, MN 55164-0378			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
<u>_</u>	☐ Contingent		
Debtor 1 only	-		
Debtor 2 only	■ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	u viaiiii.	
☐ Check if this claim is for a community debt		protion agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other Specify For: Accou		

Schedule E/F: Creditors Who Have Unsecured Claims

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Man Data Inc. alba Daaitia Oaari			
Man Data Inc. dba Pacific Coast Credit Nonpriority Creditor's Name	Last 4 digits of account number	0019	\$6,574.59
P.O. Box 40580 Eugene, OR 97404	When was the debt incurred?	5/25/2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify South Lane	ment for Radiology Associates, e Fire & Rescue; consumer debt.	
McKenzie Medical Imaging, P.C.	Last 4 digits of account number	2999	\$60.09
Nonpriority Creditor's Name 960 N. 16th St., Ste. 103 Springfield, OR 97477	When was the debt incurred?	4/2/2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	O continuent		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	Later	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes		cal services; consumer debt.	
My Quick Wallet	Last 4 digits of account number	7241	\$700.00
Nonpriority Creditor's Name P.O. Box 1146 Mission, SD 57555-1146	When was the debt incurred?	2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ ou o '' For Perso	onal Ioan; consumer debt.	

Schedule E/F: Creditors Who Have Unsecured Claims

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0		0004	A-4- F
Oregon Imaging Center Nonpriority Creditor's Name	Last 4 digits of account number	8361	\$717.5
P.O. Box 25	When was the debt incurred?	1/16/18	
Eugene, OR 97440-0025 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	no or the date you me, the claim	or chook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify For: Medic	cal services; consumer debt.	
Professional Credit Service	Last 4 digits of account number	9947	\$11,626.0
Nonpriority Creditor's Name			
P.O. Box 7548 Springfield, OR 97475-0039	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	-		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
At least one of the debtors and another	Student loans	u Ciaiii.	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	• • • • • • • • • • • • • • • • • • • •	
□Yes	■ Other. Specify consumer of	ment for several accounts; debt.	
Radiology Associates, P.C.	Last 4 digits of account number	7471	\$128.0
Nonpriority Creditor's Name P.O. Box 53 Eugene, OR 97440-0053	When was the debt incurred?	1/16/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	·	cal services; consumer debt.	

Schedule E/F: Creditors Who Have Unsecured Claims

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Rehabilitation Medicine Associates, P.C.	Last 4 digits of account number	8774	\$126.6
Nonpriority Creditor's Name 242 Country Club Rd. Eugene, OR 97401-2477	When was the debt incurred?	1/22/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify For: Medic	al services; consumer debt.	
Springfield Family Physicians			
Marcola	Last 4 digits of account number	8206	\$231.5
Nonpriority Creditor's Name 2280 Marcola Rd.	When was the debt incurred?	1/9/2017	
Springfield, OR 97477-2594 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	mation agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify For: Medic	al services; consumer debt.	
U.S. Dept. of Education	Last 4 digits of account number	7241	\$25,053.0
Nonpriority Creditor's Name P.O. Box 5609 Greenville, TX 75403-5609	When was the debt incurred?	2011	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	· ·	•••	
Debtor 1 only	☐ Contingent		
· · · · · · · · · · · · · · · · · · ·	_		
Debtor 2 only	Unliquidated		

□ Debtor 2 only
□ Debtor 1 and Debtor 2 only
□ At least one of the debtors and another
□ Check if this claim is for a community debt
Is the claim subject to offset?
□ No
□ Yes
□ Other. Specify
□ Other. Specify
□ Other. Specify
□ For: Student loan; consumer debt.
□ Check if this claim is for a community debt of None of None

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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4.2	
Λ	

Urgent Care	Last 4 digits of account number	5999	\$138.48
Nonpriority Creditor's Name	_		
P.O. Box 26034	When was the debt incurred?	9/19/16	
Eugene, OR 97402			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify For: Medic	al services; consumer debt	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
T. (.)	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 25,053.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
		you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 25,484.82
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 50,537.82

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor				
Debtor 1	Anita Marie Brae	utigan		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON	l	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Progressive Leasing
256 W. Data Dr.
Draper, UT 84020

State what the contract or lease is for
Lease for household furniture.

Fill in thi	s information to identify your	case:			
Debtor 1	Anita Marie Braeu	ıtigan			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	DISTRICT OF OREGON	١		
Case nun	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
fill it out, your nam		boxes on the left. Attach . Answer every question	the Additional Page t	o this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
_		, ou allo illing a joint base, t	ao mar mar animar apadaa		
■ No					
	ithin the last 8 years, have you na, California, Idaho, Louisiana,				
	o. Go to line 3. es. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	е
	Name			☐ Schedule E/F, I☐ Schedule G, lin	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lin	е
<u> </u>	Name			☐ Schedule E/F, I	ine
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

Fill	in this information to identify your ca	ase.						
	otor 1 Anita Marie							
	otor 2 puse, if filing)				_			
Uni	ted States Bankruptcy Court for the	: DISTRICT OF OREG	ON					
(If kr	se number						nded filing	postpetition chapter owing date:
	fficial Form 106l chedule I: Your Inc					MM / DE	V/ YYYY	
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing w	ng jointly, and your spith you, do not include	oouse i e infori	s livi natio	ng with you, in about your	clude informa spouse. If more	ation about your e space is needed,
1.	Fill in your employment information.		Debtor 1			Debte	or 2 or non-filir	ng spouse
	If you have more than one job,	E	■ Employed			□ Er	nployed	
	attach a separate page with information about additional	Employment status	☐ Not employed			□ No	t employed	
	employers.	Occupation	Certified Medicat	ion Ai	d			
	Include part-time, seasonal, or self-employed work.	Employer's name	Green Valley Ref	abilita	ation			
	Occupation may include student or homemaker, if it applies.	Employer's address	1735 Adkins St. Eugene, OR 9740)1				
		How long employed t	here? 2 yrs.					
Par	Give Details About Mor	nthly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to rep	oort for	any li	ne, write \$0 in	he space. Inclu	ıde your non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mplo	yers for that pe	rson on the line	s below. If you need
						For Debtor 1	For Debt	or 2 or g spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	2,437.9	8 \$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	741.9	1+\$	N/A

Official Form 106I Schedule I: Your Income page 1

Calculate gross Income. Add line 2 + line 3.

4. \$ 3,179.89

N/A

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12.	\$_	2,712.07
		bined

13. Do you expect an increase or decrease within the year after you file this form?

No.	
Yes. Explain:	

Official Form 106l Schedule I: Your Income page 2

Fill	I in this information to identify your case:					
Deb	btor 1 Anita Marie Braeutigan		Che	ck if this is:		
				An amended filing		
	btor 2				ving postpetition chapter	
(Spo	pouse, if filing)			13 expenses as of t	ne following date:	
Unit	ited States Bankruptcy Court for the: DISTRICT OF OREGON		-	MM / DD / YYYY		
Cas	se number					
(If k	known)					
Of	Official Form 106J					
S	chedule J: Your Expenses				12/1	5
	as complete and accurate as possible. If two married people are filing	together both	are equ	ally responsible fo		_
info	formation. If more space is needed, attach another sheet to this form. Our imber (if known). Answer every question.					
Par	rt 1: Describe Your Household					
1.	Is this a joint case?					-
	■ No. Go to line 2.					
	☐ Yes. Does Debtor 2 live in a separate household?					
	□ No					
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Sep	narate Househo	old of Deb	tor 2		
		drate Housene	na oi beb	101 2.		
2.	Do you have dependents? ☐ No					
		endent's relation or 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?	
	Do not state the				□ No	
		hew		16 yrs.	Yes	
					□ No	
					☐ Yes	
					□ No	
					☐ Yes	
					□ No	
_					☐ Yes	
3.	Do your expenses include expenses of people other than					
	yourself and your dependents?					
	art 2: Estimate Your Ongoing Monthly Expenses stimate your expenses as of your bankruptcy filing date unless you are	using this for	n 26 2 61	innlement in a Cha	nter 13 case to report	
exp	penses as of a date after the bankruptcy is filed. If this is a supplement plicable date.					
Inc	clude expenses paid for with non-cash government assistance if you kr	now				
	e value of such assistance and have included it on Schedule I: Your Inc					
(Of	fficial Form 106l.)			Your expe	enses	
4.	The rental or home ownership expenses for your residence. Include f payments and any rent for the ground or lot.	irst mortgage	4. 9	8	1,100.00	
	If not included in line 4:					
	4a. Real estate taxes		4a. \$		0.00	
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00	
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. \$		20.00 0.00	
5.	Additional mortgage payments for your residence, such as home equi	ity loans	5. §		0.00	

Debtor 1	Anita Marie Braeutigan	Case num	ber (if known)	
. Util	ities:			
. U tii 6a.	Electricity, heat, natural gas	6a.	\$	300.00
6b.	Water, sewer, garbage collection	6b.	\$	29.66
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	557.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	ou. 7.	\$	
	. •		·	230.00
	Idcare and children's education costs	8.	\$	30.00
	thing, laundry, and dry cleaning	9.	\$	25.00
	sonal care products and services	10.	\$	20.00
	dical and dental expenses	11.	\$	0.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	160.00
	not include car payments.	13.	\$	
	ertainment, clubs, recreation, newspapers, magazines, and books		·	20.00
	ritable contributions and religious donations	14.	\$	0.00
	Jrance.			
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	\$	0.00
	. Health insurance	15a. 15b.	·	0.00
			·	
	. Vehicle insurance	15c.	·	138.00
	Other insurance. Specify:	15d.	\$	0.00
_	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	•	
	cify:	16.	\$	0.00
	allment or lease payments:	47-	Φ.	0.00
	. Car payments for Vehicle 1	17a.	·	0.00
	. Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify: Lease payment for household furniture.	17c.	·	40.00
	. Other. Specify:	17d.	\$	0.00
	ir payments of alimony, maintenance, and support that you did not report as	18.	¢	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	·	
	er payments you make to support others who do not live with you.	40	\$	0.00
	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche . Mortgages on other property	20a.		0.00
		20a. 20b.	·	
	Real estate taxes		·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	. Homeowner's association or condominium dues	20e.	·	0.00
. Oth	er: Specify:	21.	+\$	0.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	2,669.66
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,003.00
			I :	
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	2,669.66
. Cal	culate your monthly net income.		L	
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,712.07
	Copy your monthly expenses from line 22c above.	23b.		2,669.66
_00		200.	T	2,003.00
230	. Subtract your monthly expenses from your monthly income.			
200	The result is your <i>monthly net income</i> .	23c.	\$	42.41
	, ,			
	you expect an increase or decrease in your expenses within the year after yo			
	example, do you expect to finish paying for your car loan within the year or do you expect you	r mortgage	payment to increase	or decrease because of a
	ification to the terms of your mortgage?			
1				
	Yes. Explain here:			

Fill in this info	rmation to identify your	case:			
Debtor 1	Anita Marie Brae		Lost Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number (if known)				_	ck if this is an nded filing
Official For			_		
Declara	tion About a	ın Individual De	ebtor's Sch	edules	12/15
	gn Below ay or agree to pay some	one who is NOT an attorney t	o help you fill out ban	kruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Declaration, and Signature	
	alty of perjury, I declare re true and correct.	that I have read the summary	and schedules filed v	vith this declaration and	
X /s/ An	ita Marie Braeutigan		Х		
Anita	Marie Braeutigan ure of Debtor 1		Signature of De	btor 2	
Date	October 16, 2019		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	in this inforn	nation to identify you	r case:			
	tor 1	Anita Marie Brae				
Deb	101 1	First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	DISTRICT OF OREGON			
Cas (if kno	e number				_	Check if this is an mended filing
Sta Be a infor	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup y additional pages, write you	
			arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	is?			
	☐ Married■ Not mar	rried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	et all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
		·	nedule H: Your Codebtors (Of	ificial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fill	l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$25,339.11	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Amount you still owe Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which you	u are a genera ny managing ag	I partner; corporations gent, including one for
	No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	bt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name
Par	rt 4: Identify Legal Actions, Repossession	o and Faradacuras	•			
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number	Nature of the case	Court or agency	n suits, paternity a	Status of the	ŕ
	In the Matter of the Marriage of Anita Marie Braeutigan and Charles Richard Braeutigan Senior 19DR12803	Dissolution of Marriage	Lane County C 125 E. 8th Eugene, OR 97		☐ Pending ☐ On appea ☐ Conclude	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
						property
	Man Data Inc. dba Pacific Coast	Explain what happened Wages.		10/1	1/19	\$291.96
	Credit P.O. Box 40580 Eugene, OR 97404	☐ Property was reposse: ☐ Property was foreclose ☐ Property was garnishe	ed.			
		☐ Property was attached	I, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan No Yes. Fill in the details. Creditor Name and Address		-		action was	mounts from your Amount

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 Anita Marie Braeutigan

	No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Joyce Sobel, Attorney at Law 451 West Broadway #17 Eugene, OR 97401 jsluckey@aol.com	Description and value of any property transferred Attorney Fees	Date payment or transfer was made October 12, 2019	Amount of payment \$1,000.00
	Yes. Fill in the details. Person Who Was Paid Address Email or website address		or transfer was	
16.	consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		ty to anyone you
Pa	rt 7: List Certain Payments or Transfers			
	how the loss occurred Include	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	■ No □ Yes. Fill in the details.			
		or since you filed for bankruptcy, did you lose any	thing because of theft	, fire, other disaster
Pa	Address (Number, Street, City, State and ZIP Code) rt 6: List Certain Losses			
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you contributed	Dates you contributed	Value
	NoYes. Fill in the details for each gift or contribution	ution.		
14.	Within 2 years before you filed for bankruptcy,	, did you give any gifts or contributions with a tota	al value of more than \$	6600 to any charity?
	Person to Whom You Gave the Gift and Address:			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	■ No □ Yes. Fill in the details for each gift.			
		, did you give any gifts with a total value of more t	han \$600 per person?	
Pa	rt 5: List Certain Gifts and Contributions			
	■ No □ Yes			
	court-appointed receiver, a custodian, or anot		· ·	, , , , , , , , , , , , , , , , , , , ,
12.	Within 1 year before you filed for bankruptcy,	was any of your property in the possession of an a	assignee for the bene	rit of creditors, a

Case number (if known)

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Anita Marie Braeutigan

Del	btor 1 Anita Marie Braeutigan			Case numbe	er (if known)	
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that you	ors or to make paymer			or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	d value of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial a ade as security (such a	ffairs? s the granting of a se			
	Person Who Received Transfer Address	Description and property transfe		paymen	e any property or ts received or debts exchange	Date transfer was made
	Person's relationship to you				3	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		any property to a s	elf-settled t	trust or similar device	of which you are a
	Name of trust	Description and	d value of the prope	erty transfe	rred	Date Transfer was made
Do	rt 8: List of Certain Financial Accounts, Ins	atuumanta Safa Dana	ait Dawas and Ota	H-it-		maue
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associon No Yes. Fill in the details.	or other financial acco	ounts; certificates o	of deposit;		,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	c n	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer
	Chase Bank P.O. Box 182051 Columbus, OH 43218-2051	XXXX-1767	■ Checking □ Savings □ Money Marke □ Brokerage □ Other	9	Closed on 0/23/19.	\$0.00
	Chase Bank P.O. Box 182051 Columbus, OH 43218-2051	XXXX-6335	☐ Checking ■ Savings □ Money Marke □ Brokerage □ Other_	g	Closed on 0/23/19.	\$0.00
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed f	or bankruptcy, any	safe depo	sit box or other depos	sitory for securities,
	■ No					
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code)	, Street, City,	Describe th	e contents	Do you still have it?
		,				

Case number (if known)

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22.	Have	e you stored property in a storage unit or p	place other than your home within 1	year before you filed for	bankruptcy?	
		No				
		Yes. Fill in the details.				
		ne of Storage Facility Iress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you have it?	
Par	t 9:	Identify Property You Hold or Control for	,			
23.	•	ou hold or control any property that some omeone.	one else owns? Include any proper	ty you borrowed from, ar	e storing for, or hold i	n trust
	_	onicone.				
		No Yes. Fill in the details.				
		ner's Name Iress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property		Value
Par	t 10:	Give Details About Environmental Inform	nation			
For	the p	urpose of Part 10, the following definitions	s apply:			
	toxic	ronmental law means any federal, state, or substances, wastes, or material into the lations controlling the cleanup of these su	air, land, soil, surface water, ground	•	•	rdous or
		means any location, facility, or property as vn, operate, or utilize it, including disposa	· · · · · · · · · · · · · · · · · · ·	law, whether you now ow	vn, operate, or utilize it	t or used
		ardous material means anything an environ rdous material, pollutant, contaminant, or		s waste, hazardous subst	ance, toxic substance	,
Rep	ort al	I notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.		
24.	Has	any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of a	an environmental law?	
		No				
		Yes. Fill in the details.				
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, in the know it	if you Date of	notice
25.	Have	you notified any governmental unit of an	y release of hazardous material?			
		No				
		Yes. Fill in the details.				
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, in the know it	if you Date of	notice
26.	Have	you been a party in any judicial or admin	istrative proceeding under any env	ronmental law? Include s	settlements and orders	s.
	■	No Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status o	of the
Par	t 11:	Give Details About Your Business or Co	nnections to Any Business			
27.	With	in 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following conne	ctions to any business	s?
		☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-tir	me	
		☐ A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)		
Offic	al Fori	m 107 Statement	of Financial Affairs for Individuals Filing	g for Bankruptcy		page

Best Case Bankruptcy

Deb	tor 1	Anita Marie Braeutigan		Case number (if known)
				-
		☐ A partner in a partnership		
		☐ An officer, director, or managing ex	ecutive of a corporation	
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation	
		No. None of the above applies. Go to F	Part 12.	
		Yes. Check all that apply above and fill	in the details below for each business.	
	Add	iness Name Iress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Num	ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
		in 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, did you give a financial statement to	o anyone about your business? Include all financial
	_	No Yes. Fill in the details below.		
		ne Iress _{Iber} , Street, City, State and ZIP Code)	Date Issued	
Part	12:	Sign Below		
are to	ue a a bai	nd correct. I understand that making a		d I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection years, or both.
		a Marie Braeutigan		
		arie Braeutigan e of Debtor 1	Signature of Debtor 2	
Date	0	october 16, 2019	Date	
Did y ■ No)	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fi	iling for Bankruptcy (Official Form 107)?
Did y	•	ay or agree to pay someone who is not	an attorney to help you fill out bankrup	otcy forms?
	-	ame of Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declaration	n, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)